Complete and send this form, together wit

PART B - FEE(S) TRANSMITTAL

licable fee(s), to: Mail

Mail Stop ISSU Commissioner l P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax

(703) 746-4000

NSTRUCTIONS: This for appropriate. All further con indicated unless corrected by maintenance fee notification	nn should be used for transf respondence including the Pa below or directed otherwise in	nitting the ISSUI itent, advance ord n Block 1, by (a)	E FEE and Plers and notifications are specifying a	ication of maintenance fees v new correspondence address	will be mailed to the current; and/or (b) indicating a separate	correspondence address as a rate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for an 10/05/2004	y change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
STAAS & HALS SUITE 700 1201 NEW YORK WASHINGTON, I 1/03/2005 HLE444 00	AVENUE, N.W.	DEC 3 0	2004 30440	I hereby certify that the States Postal Service addressed to the Mai	rtificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the c	g deposited with the United st class mail in an envelope above, or being facsimile
27 907 200	1400.00 OP	TE TRAD	EMART			(Signature)
1 FC:1501 2 FC:1504	300.00 OP					(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED IN		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/686,573	10/17/2003		Yasuhiko	o Kunii	1466.1079	8955
	ETHOD AND DEVICE FOR		·—···	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
APPLN. TYPE	SMALL ENTITY	ISSUE FEE			XXXXXX	01/05/2005
nonproviolati		\$140		\$300	\$1700	
EXAMINER		ART UNIT		CLASS-SUBCLASS		
PHAM, THANH V		2823	2823 345-062000			
. Change of correspondence address or indication of "Fee Address" (37 DFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
	RESIDENCE DATA TO BE					
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified bel a 37 CFR 3.11. Completion o	ow, no assignee of this form is NOT	data will appe Γa substitute i	ear on the patent. If an assig for filing an assignment.	nee is identified below, the o	document has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
FUJITSU HITACHI PLASMA DISPLAY LIMITED KAWASAKI, JAPAN Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
Please check the appropriate	e assignee category or categor				Corporation or other private gr	roup entity Government
a. The following fee(s) are	enclosed:	4b	Rayment of		nalagad	
<u> </u>				t in the amount of the fee(s) is enclosed. It by credit card. Form PTO-2038 is attached.		
Advance Order - # of			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-3935 (enclose an extra copy of this form).			
	(from status indicated above) MALL ENTITY status. See 3	<u> </u>	_	ant is no longer claiming SMA		
			tion Fee (if an I from anyone Office.	y) or to re-apply any previous other than the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in
Authorized Signature	M/Sha			Date	Dec, 30, 2	
Typed or printed name H. J. Staas					n No. 22,010	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.